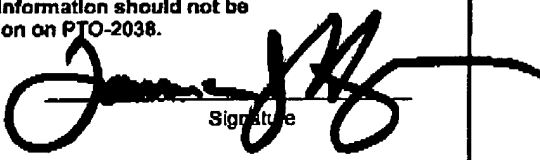


PTO/SB/31 (08-03)

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 023070-087910US		
I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, fax No. 703-872-9307 on _____ Signature _____ Typed or printed name _____	In re Application of ROSE et al. <hr/> Application Number 09/832,510 Filed April 10, 2001 <hr/> For ANTIGENIC EPITOPES WITH LYM-1 REACTIVITY AND USES THEREOF <hr/> <table style="width: 100%;"> <tr> <td style="width: 50%;">Art Unit 1642</td> <td style="width: 50%;">Examiner Huff, Sheela Jitendra</td> </tr> </table>		Art Unit 1642	Examiner Huff, Sheela Jitendra
Art Unit 1642	Examiner Huff, Sheela Jitendra			
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$330.</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$165.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>20-1430</u>. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the</p> <p><input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration number 35,551</p> <p><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a): _____</p> <div style="text-align: right; margin-top: 20px;">  _____ Signature <u>Laurence J. Hyman</u> Typed or printed name <u>415/576-0200</u> Telephone number <u>10/27/03</u> Date </div>				
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> *Total of _____ forms are submitted.</p>				